#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
- 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	26/12/2018 17:45
Date Of Accident	24/12/2018 18:10
Exact Location Of Accident	TEBRAU HIGHWAY B4 JUNC OF JLN KUNING
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SJL128J
Insured/Policyholder	
Name Of Registered Owner	ARCASIA RESOURCES PTE. LTD.
Co Reg No	200911953M
Email Address	ARCASIA_IT@GAVITON.COM
Mobile Phone No	
Alternative Phone No	OFFICE-91077326
Vehicle Particulars	
Manufacturer	CHRYSLER
Model	GRAND VOYAGER
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5096416157-01
Cover Note Number	
Driver	
Name of Driver	ONG CHEE WEE

Name of Driver

ONG CHEE WEE

NRIC No

S7811124J

Date Of Birth

Occupation

OUTDOOR

Date Of Driving Pass

24/04/2007

Driving Experience 11 YEARS AND 8 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91077326

Fax Number

Contact Number

EMail Address ARCASIA IT@GAVITON.COM

Address BLK 304 UBI AVE 1

#04-105

Postcode 400304

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - DIRECTOR

Vehicle Registration Number of Driver's Own

Vehicle

.

Insurance Company of Driver's Own Vehicle

-

**General Information of the Accident** 

Type Of Accident SIDE SWIPE
Weather Conditions CLEAR
Road Surface DRY

**Other Information** 

Was any foreign vehicle involved in this accident? YES

Foreign Vehicle Registration Number JQX2447 (PRIVATE CAR)

Number of vehicles (including own vehicle)

involved in the accident

2

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver) 7

Passenger 1 NAME: : UNKNOWN

GENDER: : MALE

Passenger 2 NAME: : UNKNOWN

GENDER: : FEMALE

Passenger 3 NAME: : UNKNOWN

GENDER: : FEMALE

Passenger 4 NAME: : UNKOWN

GENDER: : FEMALE

Passenger 5 NAME: : UNKNOWN

GENDER: : FEMALE

Passenger 6 NAME: : UNKNOWN

GENDER: : FEMALE

**Details of Police Action** 

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name KAMPONG UBI NEIGHBOURHOOD POLICE POST

Police Station Address ROAD: BLK 9 EUNOS CRESCENT #01-2687, POSTCODE: 400009,

**COUNTRY**: SINGAPORE

Police Station Contact **TEL NO**: 1800-7479999 - **FAX NO**: 67453410

Was notice of intended Prosecution given?

NO

If Yes, against whom?

### **Circumstances of Accident**

## PLS REFER TO THE POLICE REPORT:T/20181226/2081

## Attachment(s)

Are accident photos available for attachment? YES
Was there any video captured by Car Camera? NO
Was there any audio recorded? NO

# **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number JQX2447
Vehicle Make/Model/Colour TOYOTA

**Details Of Properties** 

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

**Contact Number** 

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### **Accident Sketch Plan**

#### SKETCH PLAN

#### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5 Any false reporting may be referred to the Police for Investigation.
- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of
  the report being made available aforesaid.
- Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "insurers"), the insurers lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
  - processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) investigating the accident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims. (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

mplying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time: Oriver's Signature (If driver is not the policyholder)

Date & Time:

C/121 -

Reporting Centre Personnel's Signature

Name: NRIC/FIN No.:

## **Accident Sketch Plan**

SKETCH PLAN	OF JEN KUNING	4 B4 JUNETION
		4//
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DESCRIBE CIRCUMSTANCES (	OF THE ACCIDENT	<u> Circini III III III III III III III III III </u>
Pls repr to	He police report	
-		
	- A	
DECLARATION /We declare the force particular	ars are true in every respect.	
	lun	Agra 26/12/10
Policyholder's Signal cells 3 Date & Time:	Driver's Signature (If driver is not the policyholder) Date & Time: 26 / t Z / tg	Reporting (white Personnel's Signature Name: NRIC/FIN No.:

#### **Individual Statement**





Police Station Of Origin: Kampong Ubi NPP 9 Eunos Crescent #01-2687 SINGAPORE 400009

2 of 3 Report No. T/20181226/2081

Tel No: 1800-7479999

CONTINUATION OF REPORT

Driver			SECTION AND ADDRESS.	100 May 1	Market Day	Bred Control of the Control
Name	ONG CHEE WEE		many many many	ID No		S7811124J
Related Vehicle	SJL128J (Car)			Conta	ect No.	91077326
Hospital/Clinic	NIL		Class Drivin Licena Expin	g	Class: NIL Date of Expiry: NIL	
Date Treatment	NIL		Date Disc		NIL	-
No. of Days grant	ted Medical Leave	NIL	Degree of			

#### Brief Details.

On 24/12/2018 at about at about 1810hrs, I was driving my vehicle bearing registration SJL128J a white Chrysler Grand Voyager with 6 others family members along Tebrau Highway heading towards Pandan. I was travelling in middle lane and wanted to make a right turn into Jalan Kuning (Plaza Pelangi). Before approaching the junction of Jalan Kuning, I had signal my car and start to filter into the extreme right lane. The traffic was very heavy and my vehicle had stationary before fully enter into the extreme right lane.

Out of sudden, there was a Malaysian car bearing registration number JQX2447 a white Toyota came from my right and hit onto my front right portion of my vehicle. I would like to state that there is a white stripe marking on the extreme right lane just before the white Toyota vehicle.

I had reported the incident at Johor Police Traffic with vide incident number S/030842/18. I was advised by Idac to lodge a Police report here in Singapore too. I would like to state further that no one was injured during the incident.



























Police Station Of Origin: Kampong Util NPP 9 Euros Crescent #01-2687 SINGAPORE 400009 Tel No. 1800-7479999

1 of 3 Report No. T/20181226/2081

## REPORT OF A TRAFFIC ACCIDENT

	Date/Time Report Made: 26/12/2018 15:00		Vide Report No.:	Station Diary No.: 22	
Informa	nt's Partic	ulars	THE PRINT WHEN		
Name of Informant, ONG CHEE WEE			Address: APT BLK 304 UBI AVENUE 1 #04-105 SINGAPORE 400		
ID Type NRIC N	/ID No.: C		Contact No: Home/Office: Mobile: 91077326		
National SINGAP	ity: ORE CITIZ	EN	Email		
Sex: Male	Age: 40	Date of Birth: 30/04/1978	Type of Informant:		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: SYSTEM INTEGRATOR		TOR	Driving Licence Information: Class:	Date of Expiry:	

Seneral Inform	nation of the Accide	ent de la	A STATE OF THE PARTY OF THE PAR	THE RESERVE TO SERVE
Type of Accident:	Non-Injury Others	Orink Orive: No	Date/Time of Accident: 24/12/2018 18:10	Type of Location Straight Road
Location: Along Road 1 CAUSEWAY Tebrau Highw Weather: Clear	ay before junction of	Jalan Kuning Johor Ba Road Surface: Dry		oad Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled	The state of the s	raffic Volume:
Type of Collisi	ion: ing Vehicles - Head 1	***************************************	A	nyone conveyed by mbulance:

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passe liger
JQX2447	Car	TOYOTA				0
SJL128J	Car				Slightly Damaged	7

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





Police Station Of Origin: Kampong Ubi NPP 9 Euros Crescent #01-2687 SINGAPORE 400009 Tel No: 1800-7479999

2 of 3 Report No. T/20181226/2081

CONTINUATION OF REPORT

Driver		East of the last o	0.0	THE RESERVE OF THE PARTY OF THE
Name	ONG CHEE WEE	10	No.	S7811124J
Related Vehicle	SJL128J (Car)	Co	ontact No.	91077326
Hospital/Clinic	NIL	Dr Lie	ass of iving sence & piry Date	Class: NIL Date of Expiry: NIL
Date Treatment		Date Discharg		
No. of Days grant	ed Medical Leave NIL	Degree of Inju		

#### Brief Details.

On 24/12/2018 at about at about 1810hrs, I was driving my vehicle bearing registration SJL128J a white Chrysler Grand Voyager with 6 others family members along Tebrau Highway heading towards Pandan. I was travelling in middle lane and wanted to make a right turn into Jalan Kuning (Plaza Pelangi). Before approaching the junction of Jalan Kuning, I had signal my car and start to filter into the extreme right lane. The traffic was very heavy and my vehicle had stationary before fully enter into the extreme right lane.

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I had reported the incident at Johor Police Traffic with vide incident number \$3030842/18. I was advised by Idac to lodge a Police report here in Singapore too. I would like to state further that no one was injured during the incident.





Police Station Of Origin: Kampong Ubi NPP 9 Euros Crescent #01-2687 SINGAPORE 400009

Report No. 7/2018/1226/2081

2013

Tel No: 1800-7479999

CONTINUATION OF REPORT

## Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to \$5474885 stating the report number as reference.

Signature Of Officer Recording The Report G / Staff Sgt JUHARDI BIN SAADON	Signature Of Informant:	
Signature Of Interpreter: Not applicable	Date/Time: 26/12/2018 15:00	(6)
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No : 85476151	Classification Of Case:	
Authentication Stamp	7	

Page 1 of L

POL316



POLIS DIRAJA MALAYSTA CAVIANGAN TRAFIK INII GEJABAT POLIS DAERAH JOHOR BANKU SUL (AD) JALAN TEBRAU, 80250 JOHOR BAHRU 07-1237977

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